Lienholder: Baptist Health

System, Inc.

GUARANTOR - Hollie Semmes

Patient: Hollie Semmes

Lien Amount: \$2175.00

STATEMENT OF HOSPITAL LIEN
Ala.Code 35-11-371(1975)

NOTICE IS HEREBY GIVEN, that Baptist Health System Inc in BIRMINGHAM, Alabama, claims a lien for its reasonable charges incurred in the care, treatment, and maintenance of the above patient. This lien is claimed upon any and all actions, claims, counterclaims, and demands accruing to this patient, or their legal representative, and upon all judgments, settlements, and settlement agreements entered into by virtue thereof on account of the injuries giving rise to such actions, claims, counterclaims, demands, judgments, settlements or settlement agreements, which necessitated such care, treatment or maintenance.

Patient Address: 17000 County Road 51 Jemison, AL 35085

DATE OF INJURY : 01/31/2002 ACCT #(S):

DATE OF SERVICE 02/28/02, 01/31/02

Claimant avers upon information and belief that the following persons, firms or corporations are or may be claimed by the patient to be liable for damages arising from his/her injuries:

*Under Alabama Code Section 35-11-37 (1975), the filing of this lien constitutes notice to any persons liable for such damages whether or not they are named perein.

Saptist Health System, Inc. (

State of Alabama) Jefferson County)

Personally appeared before me the undersigned Notary Public in and for said County and State, <u>BETH MERCHANT McGAUGHY</u> who being known to me did execute the above Statement of Hospital Lien in my presence and furthermore having been first duly sworn did upon oath state that (s)he executed the same with full authority and as the act of Baptist Health System, Inc.

Done this 14 day of March, 2002

Notary Public
Commission expires

Cc: Hollie Semmes

Nationwide Insurance; CLM# 77017046505-013102

03/26/2002 -14073
03:40 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
11.00